	Case 10-00774-INLIVI-7 DUC	14   Tiled 02/20/10   LOD 02/20/10 10:00.4	о гу	1 1 01 33
Fill	in this information to identify your case:			
Deb	otor 1 Robert Hayes Hoffman			
	First Name Middle N	ame Last Name		
	use if, filing)  First Name  Middle N	ame Last Name		
Unit	ted States Bankruptcy Court for the: SOUTHER	N DISTRICT OF INDIANA		
Cas	e number 18-00774-RLM			
(if kno	own)		_	ck if this is an ended filing
Off	ficial Form 106Sum			
Su	mmary of Your Assets and Liab	lities and Certain Statistical Information		12/15
infor	mation. Fill out all of your schedules first; then original forms, you must fill out a new <i>Summar</i>	ried people are filing together, both are equally responsible for complete the information on this form. If you are filing amend y and check the box at the top of this page.		
				assets e of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule	A/B	\$	624,700.00
		hedule A/B	\$_	41,731.00
	1c. Copy line 63, Total of all property on Schedule	A/B	\$	666,431.00
Part	2: Summarize Your Liabilities			
				<b>liabilities</b> unt you owe
2.	Schedule D: Creditors Who Have Claims Secured 2a. Copy the total you listed in Column A, Amount	by Property (Official Form 106D) of claim, at the bottom of the last page of Part 1 of Schedule D	\$	778,025.09
3.	Schedule E/F: Creditors Who Have Unsecured Cl 3a. Copy the total claims from Part 1 (priority uns	aims (Official Form 106E/F) ecured claims) from line 6e of <i>Schedule E/F</i>	\$	15,000.00
	3b. Copy the total claims from Part 2 (nonpriority	unsecured claims) from line 6j of Schedule E/F	\$	3,859,670.84
		Your total liabilities	\$	4,652,695.93
Part	3: Summarize Your Income and Expenses			
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12	of Schedule I	\$	0.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Sch	edule J	\$	5,493.00
Part	4: Answer These Questions for Administrati	ve and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7  ☐ No. You have nothing to report on this part of	, <b>11, or 13?</b> If the form. Check this box and submit this form to the court with yo	ur other s	chedules.
7.	■ Yes What kind of debt do you have?			
	Your debts are primarily consumer debts.	Consumer debts are those "incurred by an individual primarily for	a person:	al, family, or

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

# Case 18-00774-RLM-7 Doc 14 Filed 02/28/18 EOD 02/28/18 10:00:48 Pg 2 of 35

Debtor 1 Robert Hayes Hoffman Case number (if known) 18-00774-RLM

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
From Fart 4 on Schedule E/F, copy the following.		
9a. Domestic support obligations (Copy line 6a.)	\$	2,000.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	13,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	4,258.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	19,258.00

Debtor 1  Debtor 2 (Spouse, if filing)  United States Ba  Case number  Official Fo  Schedul  n each category, shink it fits best. Ba	Robert Hayes First Name  ankruptcy Court for t  18-00774-RLM  orm 106A/B  e A/B: Proseparately list and deseas complete and acre space is needed, at stion.	Middle Middle Middle Me: SOUTHERI  Operty Scribe items. List a	Name Name	Last Name  Last Name  RICT OF INDIANA				Check if this is an
Debtor 2 (Spouse, if filing) United States Ba Case number  Official Fo Schedul  n each category, shink it fits best. Ba	First Name First Name  ankruptcy Court for t  18-00774-RLM  orm 106A/B  e A/B: Proseparately list and deseas complete and act the space is needed, at	Middle  Middle  ne: SOUTHERI  Operty  scribe items. List a	Name	Last Name			_	
(Spouse, if filing) United States Ba Case number  Official Fo Schedul  n each category, shink it fits best. Ba	First Name First Name  ankruptcy Court for t  18-00774-RLM  orm 106A/B  e A/B: Proseparately list and deseas complete and act the space is needed, at	Middle  Middle  ne: SOUTHERI  Operty  scribe items. List a	Name	Last Name			_	
(Spouse, if filing) United States Ba Case number  Official Fo Schedul  n each category, shink it fits best. Ba	ankruptcy Court for to 18-00774-RLM  orm 106A/B  e A/B: Proseparately list and deseas complete and acted as pace is needed, at	operty scribe items. List a					_	
Official Fo Schedul n each category, s nink it fits best. B nformation. If mor	18-00774-RLM  orm 106A/B  e A/B: Proseparately list and deseas complete and acte space is needed, at	<b>Operty</b> scribe items. List a scurate as possible	N DISTE	RICT OF INDIANA			_	
Official Fo Schedul  n each category, s nink it fits best. B formation. If mor	orm 106A/B e A/B: Proseparately list and deseas complete and ace e space is needed, at	scribe items. List a					_	
Schedul n each category, s nink it fits best. B formation. If more	e A/B: Proseparately list and deseas complete and acres space is needed, at	scribe items. List a						amended filing
Schedul n each category, s nink it fits best. B formation. If more	e A/B: Proseparately list and deseas complete and acres space is needed, at	scribe items. List a						
n each category, s hink it fits best. B nformation. If mor	separately list and de Be as complete and ac re space is needed, at	scribe items. List a						40/45
hink it fits best. B	Be as complete and ac	curate as possible						12/15
□ No. Go to Par	rt 2.	itable interest in a		is the property? Check all that apply Single-family home	Do not dedu	ict secured cla	aims or	r exemptions. Put
Street address,	if available, or other descr	iption	□ Duplex or multi-unit building □ Condominium or cooperative		the amount of any secured claims on Creditors Who Have Claims Secured			
Greenwoo	od IN State	46143-0000 ZIP Code		Manufactured or mobile home Land Investment property	Current val entire prop			rent value of the tion you own?
			☐ Timeshare ☐ Other  Who has an interest in the property? Check one		Describe the nature of your ownership interes (such as fee simple, tenancy by the entireties, a life estate), if known.			
			******	nad an interest in the property. Oneck one	Tenants	in Commo	n wit	th former
				Debtor 1 only	spouse			
Johnson				Debtor 2 only				
County				Debtor 1 and Debtor 2 only  At least one of the debtors and another		if this is com	munit	y property
				At least one of the debtors and another information you wish to add about this ite try identification number:	`	ructions)		
				e from 2017 property tax assessr	nent			
	lar value of the por nave attached for P			our entries from Part 1, including any	entries for			

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debt	or 1 Robert Hayes Hoffman		Case number (if known)	18-00774-RLM
3. <b>Ca</b>	Make: BMW   Debtor 1 only   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 3 only   Debtor 4 only   Debtor 4 only   Debtor 5 only   Debtor 5 only   Debtor 5 only   Debtor 6 only   Debtor 8 only   Debtor 9 only   D			
П	No			
_				
_	165			
3.1	Make: <b>BMW</b>	Who has an interest in the property? Check one		cured claims or exemptions. Put
0	500:	<u> </u>	the amount of any	y secured claims on Schedule D: ave Claims Secured by Property.
			Current value of	, , ,
			entire property?	portion you own?
	Other information:	· · · · · · · · · · · · · · · · · · ·		
		_	¢22.024	1.00 \$22.024.00
	Leased vehicle		\$32,031	1.00 \$32,031.00
3.2	Make: <b>Jaquar</b>	Who has an interest in the property? Check one		cured claims or exemptions. Put
0.2		_	the amount of any	y secured claims on Schedule D: ave Claims Secured by Property.
		•	Current value of	, , ,
	Approximate mileage: 89,000	<u> </u>	entire property?	portion you own?
	Other information:	At least one of the debtors and another		
	Fair condition - dinged up and		<b>4=</b> 004	
			\$5,000	0.00 \$5,000.00
		(see instructions)		
Ц	Yes			
				\$37,031.00
	_			
Part 3				Current value of the
Бо у	ou own or have any legal or equitable in	nerest in any of the following items:		portion you own?  Do not deduct secured claims or exemptions.
E	ousehold goods and furnishings xamples: Major appliances, furniture, linens No	s, china, kitchenware		
	Yes. Describe			
		0.4	table and	
	four chairs, ch	est, three sofas, chair, loveseat, 2 cente	ertables, end	
				\$3,200.0
	121210 (C121)111 <b>3</b>	,,		
Fle	ectronics			
	xamples: Televisions and radios; audio, vic	deo, stereo, and digital equipment; computers, p	orinters, scanners; music c	collections; electronic devices
_	including cell phones, cameras, r	media players, games		
	Yes. Describe			

Official Form 106A/B Schedule A/B: Property page 2

**Robert Hayes Hoffman** Case number (if known) 18-00774-RLM Debtor 1 Large built-in TV (staying with home), small kitchen TV, 2 smaller \$500.00 flatscreen TV's. 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ No Yes. Describe..... \$200.00 Keltech 9mm handgun and ammo 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... \$400.00 Used mens clothing. 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$4.300.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No Yes..... Cash \$20.00

Official Form 106A/B Schedule A/B: Property page 3

Case 18-00774-RLM-7 Doc 14 Filed 02/28/18 EOD 02/28/18 10:00:48 Pg 6 of 35

D	ebtor 1	Robert Hayes	s Hoffn	nan	Case	number (if known) 18-00774-RLM
17.	•	ts of money bles: Checking, sa	avinas. o	r other financial ac	ecounts; certificates of deposit; shares in credit u	nions, brokerage houses, and other similar
					nts with the same institution, list each.	,
	□ No ■ Yes				Institution name:	
			17.1.	Checking	Old National Bank Account ending in 9216	\$380.00
18	Bonds.	mutual funds. o	or public	cly traded stocks		
					prokerage firms, money market accounts	
	■ No					
	☐ Yes			Institution or issue	er name:	
19.	. Non-pu joint ve		ock and	interests in incor	porated and unincorporated businesses, inc	luding an interest in an LLC, partnership, and
	■ No					
	☐ Yes.	Give specific info		about them me of entity:		f ownership:
20	Govern	ment and corno	rate bo	nds and other ned	gotiable and non-negotiable instruments	
20.	Negotia	able instruments	include ¡	personal checks, c	ashiers' checks, promissory notes, and money of transfer to someone by signing or delivering the	
	■ No					
	☐ Yes. (	Give specific info		about them uer name:		
21.		nent or pension bles: Interests in Il			, 403(b), thrift savings accounts, or other pensio	n or profit-sharing plans
	■ No					•
	☐ Yes. I	List each accoun	•	•		
			Type	of account:	Institution name:	
22.	Your sh		d deposi	ts you have made	so that you may continue service or use from a try, public utilities (electric, gas, water), telecomm	
	■ No					
	☐ Yes				Institution name or individual:	
23.	. Annuiti	ies (A contract fo	r a perio	dic payment of mo	ney to you, either for life or for a number of year	s)
	☐ Yes	lss	uer nam	ne and description.		
24.	26 U.S.C	s in an educatio C. §§ 530(b)(1), 5			qualified ABLE program, or under a qualified	d state tuition program.
	■ No □ Yes	Ins	stitution i	name and descripti	ion. Separately file the records of any interests.1	1 U.S.C. § 521(c):
25.	. Trusts, ■ No	equitable or fut	ure inte	rests in property	(other than anything listed in line 1), and righ	nts or powers exercisable for your benefit
	_	Give specific info	ormation	about them		
26.					and other intellectual property eeds from royalties and licensing agreements	
	■ No					
	☐ Yes.	Give specific info	ormation	about them		
27.	_Examp			er general intangib dusive licenses, co	bles operative association holdings, liquor licenses, μ	professional licenses
	■ No □ Yes.	Give specific info	ormation	about them		
M	onev or r	property owed to	ס עמנו?			Current value of the
	. ,		,			

Official Form 106A/B Schedule A/B: Property

Case 18-00774-RLM-7 Doc 14 Filed 02/28/18 EOD 02/28/18 10:00:48 Pg 7 of 35

Debt	or 1	Robert Hayes Hoffman	Case	number (if known)	18-00774-RLM
					portion you own? Do not deduct secured claims or exemptions.
28. <b>T</b>	ax ref	funds owed to you			
	No Yes.	Give specific information about them, including	ng whether you already filed the returns and the	tax years	
		support ples: Past due or lump sum alimony, spousal	support, child support, maintenance, divorce se	ettlement, property	settlement
		Give specific information			
_		amounts someone owes you  bles: Unpaid wages, disability insurance paym  benefits; unpaid loans you made to som	nents, disability benefits, sick pay, vacation pay, eone else	, workers' comper	nsation, Social Security
		Give specific information			
		ets in insurance policies  oles: Health, disability, or life insurance; health	n savings account (HSA); credit, homeowner's,	or renter's insurar	nce
		Name the insurance company of each policy Company name:	and list its value.  Beneficiary:		Surrender or refund value:
ا :_	If you a	terest in property that is due you from son are the beneficiary of a living trust, expect pro one has died.	neone who has died ceeds from a life insurance policy, or are curren	ntly entitled to rece	eive property because
	No Yes.	Give specific information			
		against third parties, whether or not you ples: Accidents, employment disputes, insurar	have filed a lawsuit or made a demand for pance claims, or rights to sue	ayment	
		Describe each claim			
	Other o	contingent and unliquidated claims of eve	ry nature, including counterclaims of the del	btor and rights to	set off claims
		Describe each claim			
		nancial assets you did not already list			
	No Yes.	Give specific information			
36.		•	Part 4, including any entries for pages you h		\$400.00
Part :	5: De	scribe Any Business-Related Property You Own	or Have an Interest In. List any real estate in Part	1.	
37. <b>D</b>	o you d	own or have any legal or equitable interest in an	y business-related property?		
_		to Part 6.			
Ц	Yes. G	Go to line 38.			
Part (		scribe Any Farm- and Commercial Fishing-Relat ou own or have an interest in farmland, list it in Part			
	_ `	own or have any legal or equitable intere	st in any farm- or commercial fishing-related	I property?	
		. Go to line 47.			
Officia	al Forr	m 106A/B	Schedule A/B: Property		page

Software Copyright (c) 1996-2018 Best Case, LLC - www.bestcase.com

Case number (if known) 18-00774-RLM

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 List the Totals of Each Part of this Form Part 1: Total real estate, line 2 \$624,700.00 Part 2: Total vehicles, line 5 \$37.031.00 57. Part 3: Total personal and household items, line 15 \$4,300.00 58. Part 4: Total financial assets, line 36 \$400.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 62. Total personal property. Add lines 56 through 61... \$41,731.00 Copy personal property total \$41,731.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$666,431.00

Official Form 106A/B Schedule A/B: Property page 6

Debtor 1

**Robert Hayes Hoffman** 

	Case 1	18-00774-RLM-	7 Doc 14	Filed 02/28/18	EOD 02/28/18	10:00:48	Pg 9 of 35
Fill in	this informa	ation to identify your	case:				
Debto	r 1	Robert Hayes Hof					
Debto	r 2	First Name	Middle Name	Last Name			
(Spouse	if, filing)	First Name	Middle Name	Last Name			
United	States Bank	kruptcy Court for the:	SOUTHERN DIS	TRICT OF INDIANA			
Case r	number 18	8-00774-RLM					
(if knowr	1)						Check if this is an amended filing
Be as of the propeeded needed case no For eac specifi	complete and perty you list I, fill out and umber (if kno ch item of p c dollar and	d accurate as possible. ted on Schedule A/B: F attach to this page as rown).	If two married peoperty (Official Fomany copies of Parexempt, you must natively, you may	rm 106A/B) as your sour t 2: Additional Page as n specify the amount of claim the full fair mark	th are equally responsible ce, list the property that ye	ou claim as exe ny additional pa n. One way of being exempte	empt. If more space is ages, write your name and doing so is to state a ed up to the amount of
funds- exemp	- may be un tion to a pa	limited in dollar amou	unt. However, if yo	ou claim an exemption	of 100% of fair market vaned to exceed that amou	alue under a la	w that limits the
Part 1	Identify	the Property You Cla	im as Exempt				
1. <b>W</b> I	hich set of e	exemptions are you cl	laiming? Check or	e only, even if your spou	se is filing with you.		
	You are clai	iming state and federal	nonbankruptcy exe	emptions. 11 U.S.C. § 5	22(b)(3)		
	You are clai	ming federal exemption	ns. 11 U.S.C. § 52	2(b)(2)			
2. <b>Fo</b>	r any prope	erty you list on Sched	ule A/B that you c	laim as exempt, fill in tl	ne information below.		

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2009 Jaguar XF 89,000 miles Fair condition - dinged up and has	\$5,000.00		\$5,000.00	Ind. Code § 34-55-10-2(c)(2)
mechancial issues Value reflects estimated cost of repair Driven by son Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
3 bedroom sets, 2 dressers, 3 drawer stand, tall game table and four	\$3,200.00		\$3,200.00	Ind. Code § 34-55-10-2(c)(2)
chairs, chest, three sofas, chair, loveseat, 2 centertables, end table ktichen table and chairs, piano, office desk and chair, two side chairs, desk with bookshelf, 2 small sofas, chess s Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Large built-in TV (staying with home), small kitchen TV, 2 smaller	\$500.00		\$500.00	Ind. Code § 34-55-10-2(c)(2)
flatscreen TV's. Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	

## Case 18-00774-RLM-7 Doc 14 Filed 02/28/18 EOD 02/28/18 10:00:48 Pg 10 of 35

De	ebtor 1 Robert Hayes Hoffman			Case number (if known)	18-00774-RLM	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Specific laws that allow e		Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	Keltech 9mm handgun and ammo Line from Schedule A/B: 10.1	\$200.00		\$200.00	Ind. Code § 34-55-10-2(c)(2)	
	2.10 10.11 00/1000/07			100% of fair market value, up to any applicable statutory limit		
	Used mens clothing.	\$400.00		\$400.00	Ind. Code § 34-55-10-2(c)(2)	
	Line IIoiii Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit		
	Cash Line from Schedule A/B: 16.1	\$20.00		\$20.00	Ind. Code § 34-55-10-2(c)(3)	
	Line nom <i>Schedule A/B</i> . 10.1			100% of fair market value, up to any applicable statutory limit		
	Checking: Old National Bank Account ending in 9216	\$380.00		\$380.00	Ind. Code § 34-55-10-2(c)(3)	
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exempt (Subject to adjustment on 4/01/19 and ev  ■ No			led on or after the date of adjustmer	nt.)	
	Yes. Did you acquire the property co	overed by the exemption wi	thin 1	,215 days before you filed this case	?	
	□ No □ Yes					

Fill in this infor	mation to identify you	ır case:			
Debtor 1	Robert Hayes H				
20010.	First Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name Last Name			
· · · · · · · · · · · · · · · · · · ·					
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT OF INDIANA			
_	18-00774-RLM				
(if known)					if this is an led filing
				amend	led IIIIIg
Official Forr	m 106D				
Schedule	D: Creditors	Who Have Claims Secure	d by Property	y	12/15
s needed, copy th number (if known) 1. Do any creditors	ne Additional Page, fill it on the control of the c	If two married people are filing together, both are ed but, number the entries, and attach it to this form. On y your property? his form to the court with your other schedules. Y	n the top of any addition	nal pages, write your na	
_		•	ou have nothing else to	report on this form.	
	n all of the information	below.			
	All Secured Claims	nore than one secured claim, list the creditor separately	, Column A	Column B	Column C
for each claim. If n	more than one creditor has	a particular claim, list the other creditors in Part 2. As cal order according to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 BMO Har	ris	Describe the property that secures the claim:	\$188,708.00	\$624,700.00	\$0.00
Creditor's Nam	ne	2899 Osterly Court Greenwood, IN 46143 Johnson County Value from 2017 property tax			
770 N. Wa	nkruptcy Dept. ater Street ee, WI 53202	As of the date you file, the claim is: Check all that apply.			
	et, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
		☐ Disputed			
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.	ourod		
Debtor 2 only		□ An agreement you made (such as mortgage or second car loan)	curea		
Debtor 1 and D	Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
	the debtors and another	☐ Judgment lien from a lawsuit			
Check if this c		Other (including a right to offset)			
Date debt was inc	Opened 11/05 Last Active curred 11/07/17	Last 4 digits of account number			
2.2 BMW Fin	ancial Services	Describe the property that secures the claim:	\$14,700.00	\$32,031.00	\$0.00
Creditor's Nam	ne	2016 BMW 528i 18,000 miles			
Attn: Ban		Very good condition Leased vehicle			
Departme Po Box 3		As of the date you file, the claim is: Check all that			
Dublin, O		apply. ☐ Contingent			
Number, Stree	et, City, State & Zip Code	☐ Unliquidated			
Who owes the de	ebt? Check one	☐ Disputed  Nature of lien. Check all that apply.			
■ Debtor 1 only		☐ An agreement you made (such as mortgage or see	cured		
Debtor 2 only		car loan)			
Debtor 1 and D	· · · · · · · · · · · · · · · · · · ·	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of	the debtors and another	☐ Judgment lien from a lawsuit			

Official Form 106D

	Robert Ha	yes Hoffman Middle N	lame Last Name	Case number (if know)	18-00774-RLM	
_						
	f this claim re inity debt	elates to a	Other (including a right to offset)	ase		
Date debt w	vas incurred	Opened 11/16 Last Active 1/19/18	Last 4 digits of account number	1		
2.3 Citin	nortgage		Describe the property that secures the claim:	\$412,680.00	\$624,700.00	\$0.00
	pr's Name		2899 Osterly Court Greenwood, IN 46143 Johnson County Value from 2017 property tax		<b>402</b> 1,1 00.00	
_	Box 6243 ıx Falls, Sl	<b>n</b>	As of the date you file, the claim is: Check all that	_		
	ıx raiis, si 17-6243	J	apply. □ Contingent			
Numbe	er, Street, City, S	State & Zip Code	☐ Unliquidated			
Who owes	the debt?	heck one	☐ Disputed  Nature of lien. Check all that apply.			
Debtor 1		HECK OHE.	☐ An agreement you made (such as mortgage or	secured		
Debtor 2	-		car loan)			
_	and Debtor 2	-	Statutory lien (such as tax lien, mechanic's lien)	)		
	one of the deb f this claim re	otors and another	☐ Judgment lien from a lawsuit	10		
	inity debt	elates to a	Other (including a right to offset) Mortgag			
		Opened 10/04 Last Active				
Date debt w	vas incurred	10/02/17	Last 4 digits of account number 293	1		
2.4 Dani	iel E. Brun	ette	Describe the property that secures the claim:	\$48,229.09	\$624,700.00	\$48,229.09
	or's Name		2899 Osterly Court Greenwood, IN 46143 Johnson County Value from 2017 property tax	710,220.00	<b>402-1,1 00:00</b>	
500 200	E. Ohio St	reet, Suite	assessment As of the date you file, the claim is: Check all that			
	anapolis, I	N 46204	apply. □ Contingent			
Numbe	er, Street, City, S	State & Zip Code	☐ Unliquidated			
			Disputed			
_	the debt? C	heck one.	Nature of lien. Check all that apply.	d		
■ Debtor 1 □ Debtor 2	,		☐ An agreement you made (such as mortgage or car loan)	securea		
	and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic's lien	)		
		otors and another	Judgment lien from a lawsuit	,		
	f this claim re inity debt	elates to a	Other (including a right to offset)			
Date debt w	vas incurred	05/14/2009	Last 4 digits of account number 039	1		
2.5 First N.A.	t Merchan	ts Bank,	Describe the property that secures the claim:	Unknown	\$624,700.00	Unknown
Credito	or's Name		2899 Osterly Court Greenwood, IN	]		
			Value from 2017 property tax			
000	East !!	nan C++	As of the date you file, the claim is: Check all that	Л		
	East Jack cie, IN 473	son Street 805	apply.			

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

Debtor			Case number (if know)	18-00774-RLM						
	First Name Middle N	ame Last Name								
	umber, Street, City, State & Zip Code	☐ Unliquidated								
		☐ Disputed								
Who ov	ves the debt? Check one.	Nature of lien. Check all that apply.								
	or 1 only	☐ An agreement you made (such as mortgage or se	ecured							
	or 2 only	car loan)								
	or 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)								
	ast one of the debtors and another	Judgment lien from a lawsuit								
	ck if this claim relates to a nmunity debt	Other (including a right to offset)								
Date de	bt was incurred	Last 4 digits of account number 0383								
2.6 In	ndiana Department of		<b>\$0.747.00</b>	\$504.700.00	<b>\$0.747.00</b>					
R	evenue	Describe the property that secures the claim:	\$6,747.00	\$624,700.00	\$6,747.00					
Cr	editor's Name	2899 Osterly Court Greenwood, IN								
_		46143 Johnson County Value from 2017 property tax								
	ankruptcy Section, -240	assessment								
	-240 00 North Senate Avenue	As of the date you file, the claim is: Check all that								
In	idianapolis, IN 46204	apply. ☐ Contingent								
Nu	umber, Street, City, State & Zip Code	☐ Unliquidated								
		☐ Disputed								
Who ov	ves the debt? Check one.	Nature of lien. Check all that apply.								
	or 1 only	An agreement you made (such as mortgage or so car loan)	ecured							
	or 2 only	<u> </u>								
☐ Debt	or 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)								
	ast one of the debtors and another	Judgment lien from a lawsuit								
	ck if this claim relates to a nmunity debt	Other (including a right to offset)  Tax Lien								
Date de	bt was incurred	Last 4 digits of account number								
	ternal Revenue Service	Describe the property that secures the claim:	\$106,961.00	\$624,700.00	\$83,649.00					
Cr	editor's Name	2899 Osterly Court Greenwood, IN								
С	entralized Insolvency	46143 Johnson County								
	perations	Value from 2017 property tax assessment								
•	O Box 7346 hiladelphia, PA	As of the date you file, the claim is: Check all that								
	9101-7346	apply.  Contingent								
_	umber, Street, City, State & Zip Code	☐ Unliquidated								
	, , , ,	☐ Disputed								
Who ov	ves the debt? Check one.	Nature of lien. Check all that apply.								
Debt	or 1 only	☐ An agreement you made (such as mortgage or se	ecured							
☐ Debt	or 2 only	car loan)								
☐ Debt	or 1 and Debtor 2 only	■ Statutory lien (such as tax lien, mechanic's lien)								
☐ At lea	ast one of the debtors and another	☐ Judgment lien from a lawsuit								
	ck if this claim relates to a nmunity debt	Other (including a right to offset)  Federal T	ax Lien							
Date de	bt was incurred 12/31/2014	Last 4 digits of account number 8948								
Add th	ne dollar value of your entries in C	olumn A on this page. Write that number here:	\$778,025.	09						
If this	is the last page of your form, add	the dollar value totals from all pages.	\$778,025.							
Write	that number here:		<b>4.10,020.</b>							

Part 2: List Others to Be Notified for a Debt That You Already Listed

Best Case Bankruptcy

## Case 18-00774-RLM-7 Doc 14 Filed 02/28/18 EOD 02/28/18 10:00:48 Pg 14 of 35

Debtor 1	Robert Hayes Ho	offman		Case number (if know)	18-00774-RLM
	First Name	Middle Name	Last Name		
trying to than one	collect from you for a d	ebt you owe to someone els debts that you listed in Part	se, list the creditor in Par	t 1, and then list the collection ager	or example, if a collection agency is ncy here. Similarly, if you have more ional persons to be notified for any
BI Po	ame, Number, Street, City MO Harris Bank N. O Box 367 rlington Heights, II	A.		On which line in Part 1 did you enter Last 4 digits of account number	

Official Form 106D

	Ouse	, 10 00114 IXEM 1	<b>D</b> 00	14 1 1100 021	20,10	LOD	02/20/10 10.	00.40	. 9 -	0 01 00
Fil	l in this info	rmation to identify your o	case:							
De	btor 1	Robert Hayes Hof	fman							
DC	DIOI I	First Name		e Name	Last Name	<del></del>				
De	btor 2									
(Sp	ouse if, filing)	First Name	Middle	Name	Last Name	•				
Un	ited States B	ankruptcy Court for the:	SOUTHE	RN DISTRICT OF IN	DIANA					
Ca	se number	18-00774-RLM								
	nown)	10 00114 1(Liii							Check	if this is an
								_	amend	led filing
∩f	ficial For	m 106E/F								
		E/F: Creditors W	ho Hav	e Unsecured	Claim	<b>S</b>				12/15
Sch left.	edule D: Cred Attach the Co	cutory Contracts and Unexpi litors Who Have Claims Sect ontinuation Page to this pag- umber (if known).	ired by Prop	erty. If more space is i	needed, co	py the Part	t you need, fill it out,	number the	entries iı	n the boxes on the
Pa	rt 1: List	All of Your PRIORITY Un	secured CI	aims						
1.	Do any credi	itors have priority unsecured	d claims aga	inst you?						
	☐ No. Go to	Part 2.								
	Yes.									
2.	identify what possible, list	ur priority unsecured claims type of claim it is. If a claim ha the claims in alphabetical orde e than one creditor holds a pai	s both priority r according to	y and nonpriority amount the creditor's name. If	ts, list that o you have m	laim here a	and show both priority a	ind nonpriorit	y amoun	ts. As much as
	(For an expla	nation of each type of claim, s	ee the instruc	ctions for this form in the	instruction	booklet.)				
	_						Total claim	Priority amount		Nonpriority amount
2.1		a Department of Reve	nue	Last 4 digits of accoun	nt number	8948	\$13,000.00	\$13,0	00.00	\$0.00
	Bankr 100 No	creditor's Name uptcy Section, N-240 orth Senate Avenue		When was the debt in	curred?	12/31/2	016	-		
		apolis, IN 46204 Street City State Zlp Code		As of the date you file	the claim	is: Check a	all that apply			
		ed the debt? Check one.		☐ Contingent	,	ioi onook t	an triat apply			
	Debtor 1	only		☐ Unliquidated						
	Debtor 2	? only		☐ Disputed						
	Debtor 1	and Debtor 2 only		Type of PRIORITY uns	secured cla	im:				
		one of the debtors and anothe	r	☐ Domestic support of	bligations					
		f this claim is for a commun		Taxes and certain or	ther debts v	OU OWE the	government			
		subject to offset?	•	☐ Claims for death or p						
	■ No			☐ Other. Specify		, , .				
	☐ Yes				x Liabili	ty				
						-				

Case 18-00774-RLM-7 Doc 14 Filed 02/28/18 EOD 02/28/18 10:00:48 Pg 16 of 35

Debt	Pr 1 Robert Hayes Hoffman		Cas	se number (if know)	18-00774-RLM	<u> </u>
2.2	Rebecca Kay Hoffmann	Last 4 digits of account number	8948	\$2,000.00	\$2,000.0	0 \$0.00
	Priority Creditor's Name 1030 Peppermill Run Greenwood, IN 46143	When was the debt incurred?	2017		-	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Chec	k all that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	☐ At least one of the debtors and another	■ Domestic support obligations				
	☐ Check if this claim is for a community debt	☐ Taxes and certain other debts y	ou owe t	the government		
	Is the claim subject to offset?	☐ Claims for death or personal inj		•		
	■ No	Other. Specify				
	☐ Yes	Estiamted		support arrearage.		_
				n terminated in 201	17 due to son	
		reaching a	ge of r	najority.		
Part	2: List All of Your NONPRIORITY Unsecu	red Claims				
3. D	o any creditors have nonpriority unsecured claims	s against you?				
	No. You have nothing to report in this part. Submit t	his form to the court with your other s	chedule	S.		
	Yes.					
u th	ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each clause one creditor holds a particular claim, list the other art 2.	aim. For each claim listed, identify wh	at type o	of claim it is. Do not list cla	aims already include	d in Part 1. If more
					To	tal claim
4.1	Bank Of America	Last 4 digits of account numb	er 53	378		\$22,573.00
	Nonpriority Creditor's Name					<del></del>
	Nc4-105-03-14			pened 10/04 Last /	Active	
	Po Box 26012 Greensboro, NC 27410	When was the debt incurred?	9/	16/17		
	Number Street City State Zlp Code	As of the date you file, the cla	m is: Ch	neck all that apply		
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecu	red clai	im:		
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a s	eparation	n agreement or divorce th	at you did not	
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sh	0.	ns, and other similar debt	s	
	Yes	Other. Specify Credit Ca	ard			

Case 18-00774-RLM-7 Doc 14 Filed 02/28/18 EOD 02/28/18 10:00:48 Pg 17 of 35

Debtor	1 Robert Hayes Hoffman		Case number (if know) 18-00774-RI	LM			
4.2	Bank Of America	Last 4 digits of account number	4368	\$7,065.00			
	Nonpriority Creditor's Name Nc4-105-03-14 Po Box 26012 Greensboro, NC 27410	When was the debt incurred?	Opened 03/97 Last Active 1/20/18				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not				
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>				
4.3	BMW Bank Of North America Nonpriority Creditor's Name	Last 4 digits of account number	0364	\$7,874.00			
	2735 East Parleys Ways Salt Lake City, UT 84109	When was the debt incurred?	Opened 12/16 Last Active 1/19/18				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	Debtor 1 only	Пол					
		☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecure	d claim:				
	_	Student loans	- Julii				
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims	report as priority claims				
	■ No	Debts to pension or profit-sharing					
	Yes	Other. Specify Credit Card	<u> </u>				
4.4	Candice Dielman	Last 4 digits of account number		Unknown			
	Nonpriority Creditor's Name c/o Robert M. Traylor, Esq. 750 B Street, Suit 2100 San Diego, CA 92101-8177	When was the debt incurred?	2017				
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply				
	Who incurred the debt? Check one.	- Counting would					
	☐ Debtor 1 only ☐ Contingent						
	☐ Debtor 2 only	Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
	$\square$ Check if this claim is for a community debt		aration agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims					
	□ No	Debts to pension or profit-sharir					
	Yes	Other Specify Potential F	INRA claim				

Case 18-00774-RLM-7 Doc 14 Filed 02/28/18 EOD 02/28/18 10:00:48 Pg 18 of 35

Debtor	1 Robert Hayes Hoffman		Case number (if know) 18	3-00774-RLM			
4.5	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	6076	\$7,565.00			
	Centralized Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0285	When was the debt incurred?	Opened 01/17 Last Act 1/19/18	ive			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	Debtor 1 only	Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecured	d claim:				
	At least one of the debtors and another	Student loans	a Claim.				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce that y	ou did not			
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	Other. Specify Charge Acc	count				
4.6	Chase Card Services	Last 4 digits of account number	5245	\$11,245.00			
	Nonpriority Creditor's Name Attn: Correspondence Dept		Opened 05/17 Last Act	ive			
	Po Box 15298 Wilmington, DE 19850	x 15298 When was the debt incurred? 1/2					
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply				
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing					
	Yes	Other. Specify Credit Card	I - Southwest				
4.7	Citizens One	Last 4 digits of account number	8948	\$1,388.84			
	Nonpriority Creditor's Name PO Box 42124 Providence, RI 02940-2124	When was the debt incurred?	2017				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only						
	☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that y	ou did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	■ Other. Specify Vivent secu	ırity				

Case 18-00774-RLM-7 Doc 14 Filed 02/28/18 EOD 02/28/18 10:00:48 Pg 19 of 35

Debtor	1 Robert Hayes Hoffman		Case number (if know) 1	8-00774-RLM			
4.8	Credit Collections Services	Last 4 digits of account number	3931	\$463.00			
	Nonpriority Creditor's Name Attention: Bankruptcy 725 Canton Street Norwood, MA 02062	When was the debt incurred?	Opened 11/18/17				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that	you did not			
	■ No	Debts to pension or profit-sharing	• •				
	Yes	Other. Specify Collection	agent for Progressive In	surance			
4.9	Densel Ray Ball Nonpriority Creditor's Name	Last 4 digits of account number	8948	\$25,000.00			
	Nonpholity Orealion's Name	When was the debt incurred?	11/2017-01/2018				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	you did not				
	No	Debts to pension or profit-sharing	g plans, and other similar debts				
	Yes	Other. Specify Personal Lo	oan for household expe	nses			
4.1	Discover Financial	Last 4 digits of account number	3709	\$5,492.00			
	Nonpriority Creditor's Name PO Box 6103 Carol Stream, IL 60197-6103	When was the debt incurred?	Opened 04/17 Last Ac 1/19/18	ctive			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply				
	■ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that	vou did not			
	Is the claim subject to offset?	report as priority claims		y			
	■ No	$\square$ Debts to pension or profit-sharin	g plans, and other similar debts				
	Yes	■ Other Specify Credit Card					

Case 18-00774-RLM-7 Doc 14 Filed 02/28/18 EOD 02/28/18 10:00:48 Pg 20 of 35

Debte	or 1 Robert Hayes Hoffman		Case number (if know) 18-00774-RLM			
4.1 1	Discover Financial	Last 4 digits of account number	0795	Unknown		
	Nonpriority Creditor's Name PO Box 6103 Carol Stream, IL 60197-6103	When was the debt incurred?	Opened 11/12/98 Last Active 6/16/11			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	□Yes	Other. Specify Credit Card	<u> </u>			
4.1	FedLoan Servicing	Last 4 digits of account number	0001	\$1,977.00		
	Nonpriority Creditor's Name  Attention: Bankruptcy		Opened 1/15/12 Last Active			
	Po Box 69184	When was the debt incurred?	2/02/16			
	Harrisburg, PA 17106	_				
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.	Пол				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:			
	At least one of the debtors and another	Student loans	a diami.			
	☐ Check if this claim is for a community debt	_				
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	ebts to pension or profit-sharing plans, and other similar debts			
	☐ Yes	Other. Specify				
		Student Lo	an			
4.1						
3	FedLoan Servicing  Nonpriority Creditor's Name	Last 4 digits of account number	0002	\$1,257.00		
	Attention: Bankruptcy		Opened 8/10/12 Last Active			
	Po Box 69184	When was the debt incurred?	2/02/16			
	Harrisburg, PA 17106					
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
		☐ Unliquidated				
	Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims	<u> </u>			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	☐ Other. Specify				

Official Form 106 E/F

Student Loan

Case 18-00774-RLM-7 Doc 14 Filed 02/28/18 EOD 02/28/18 10:00:48 Pg 21 of 35

Debto	r 1 Robert Hayes Hoffman		Case number (if know) 18-00774-RLM	
4.1 4	FedLoan Servicing	Last 4 digits of account number	0003	\$1,024.00
	Nonpriority Creditor's Name Attention: Bankruptcy Po Box 69184 Harrisburg, PA 17106	When was the debt incurred?	Opened 8/22/12 Last Active 2/02/16	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated ☐ Disputed		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other. Specify		
		Student Lo	an	
4.1 5	Internal Revenue Service	Last 4 digits of account number	8948	\$50,541.00
	Nonpriority Creditor's Name Centralized Insolvency Operations PO Box 7346	When was the debt incurred?	12/31/2012	
	Philadelphia, PA 19101-7346  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured  Student loans	d claim:	
	☐ Check if this claim is for a community debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?  ■ No	report as priority claims  Debts to pension or profit-sharin	o plans, and other similar debts	
	☐ Yes		come Tax Liability	
		Other. Specify 1 5755 Tal. II		
4.1 6	Internal Revenue Service Nonpriority Creditor's Name	Last 4 digits of account number	8948	Unknown
	Centralized Insolvency Operations PO Box 7346	When was the debt incurred?	12/31/2013	
	Philadelphia, PA 19101-7346  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	□ Yes	Other Specific Personal In	come Tax Liability	

Case 18-00774-RLM-7 Doc 14 Filed 02/28/18 EOD 02/28/18 10:00:48 Pg 22 of 35

Debtor	Robert Hayes Hoffman		Case number (if know)	18-00774-RLM	
4.1 7	Internal Revenue Service	Last 4 digits of account number	8948		\$100,597.00
	Nonpriority Creditor's Name Centralized Insolvency Operations PO Box 7346	When was the debt incurred?	12/31/2014		
	Philadelphia, PA 19101-7346  Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce th	nat you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar deb	ts	
	Yes	Other. Specify Personal In	come Tax Liability		
4.1	Internal Revenue Service	Last 4 digits of account number	8948		\$98,096.00
_	Nonpriority Creditor's Name  Centralized Insolvency Operations PO Box 7346	When was the debt incurred?	12/31/2015		
	Philadelphia, PA 19101-7346				
	Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	nat you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar deb	ts	
	Yes	■ Other. Specify Personal In	come Tax Liability		
4.1 9	Jacquelyn Hoffmann	Last 4 digits of account number	8948		\$20,000.00
	Nonpriority Creditor's Name 2899 Osterly Court Greenwood, IN 46143	When was the debt incurred?	11/2017-01/2018		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply		
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce the	nat you did not	
	Is the claim subject to offset?	report as priority claims	<b>5</b>	•	
	■ No	Debts to pension or profit-sharing	g plans, and other similar deb	ts	
	Yes	■ Other, Specify Personal Le	oan for household exp	oenses	

Case 18-00774-RLM-7 Doc 14 Filed 02/28/18 EOD 02/28/18 10:00:48 Pg 23 of 35

r 1 Robert Hayes Hoffman		Case number (if know) 18-00774-R	LM
Kensington Grove Homeowners			
Assoc., Inc.	Last 4 digits of account number	ourt	\$530.00
Nonpriority Creditor's Name c/o Kevin McGinnis, President 4300 N. 725 W.	When was the debt incurred?	01/2018	
Bargersville, IN 46106			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed  Type of NONPRIORITY unsecure	d claim:	
☐ At least one of the debtors and another	Student loans	d Claim.	
☐ Check if this claim is for a community debt Is the claim subject to offset?	<u> </u>	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	or plans, and other similar debts	
Yes	■ Other. Specify HOA Dues	g plane, and other cirmial debte	
Kris and Sandy Dielman	Last 4 digits of account number	0857	\$3,200,000.00
Nonpriority Creditor's Name c/o Robert M. Traylor, Esq. 750 B Street, Suit 2100	When was the debt incurred?	04/03/2017	
San Diego, CA 92101-8177  Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.	_	er chook all that apply	
☐ Debtor 1 only	Contingent		
☐ Debtor 2 only	Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
□ No	Debts to pension or profit-sharing	g plans, and other similar debts	
■ Yes	Other. Specify Pending FI	NRA Arbitration Claim	
			*
Lew Derrickson  Nonpriority Creditor's Name	Last 4 digits of account number	8948	\$32,000.00
5799 Sunset Lane Indianapolis, IN 46228	When was the debt incurred?	2016	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing		
☐ Yes	Other. Specify Personal Ic	oan	

Case 18-00774-RLM-7 Doc 14 Filed 02/28/18 EOD 02/28/18 10:00:48 Pg 24 of 35

Debt	or 1 Robert Hayes Hoffman		(if know) 18-00//4-RLN	1
4.2 3	LoanMe Inc.	Last 4 digits of account number	1159	\$27,983.00
	Nonpriority Creditor's Name 1900 S. State College Blvd., Suite 300 Anaheim, CA 92806	When was the debt incurred?	Opened 05/17 Last Active 1/01/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured  Student loans	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Loan		
4.2 4	Louis Vasquez	Last 4 digits of account number	Unknown	\$150,000.00
	Nonpriority Creditor's Name c/o Robert M. Traylor, Esq. 5060 North Harbor Drive, Suite 275 San Diego, CA 92106	When was the debt incurred?	11/12/2017	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	Contingent		
	☐ Debtor 1 only ☐ Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	■ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims		
	□ No	☐ Debts to pension or profit-sharing		
	Yes	Other. Specify Pending FI	NRA Arbitration Claim	
4.2 5	Peter Broscoe	Last 4 digits of account number	8948	\$62,000.00
	Nonpriority Creditor's Name Real Estate Mortgage Network 1642 W. Smith Valley Road, Suite A Greenwood, IN 46142	When was the debt incurred?	2016	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other Specify Personal Letter	oan	

Case 18-00774-RLM-7 Doc 14 Filed 02/28/18 EOD 02/28/18 10:00:48 Pg 25 of 35

Debtor	1 Robert Hayes Hoffman			Case number (if know)	18-00774-R	LM
4.2 6	Thurston, Springer, Miller,	Last 4 digits of accoun	t number	1274		\$25,000.00
	Nonpriority Creditor's Name Herd & Titak, Inc. 9000 Keystone Crossing, Suite 740	When was the debt inc	urred?	12/14/2017		
	Indianapolis, IN 46240  Number Street City State Zlp Code	As of the date you file,	the claim	is: Check all that apply		
	Who incurred the debt? Check one.	■ Contingent				
	■ Debtor 1 only	■ Unliquidated				
	Debtor 2 only	<u> </u>				
	Debtor 1 and Debtor 2 only	■ Disputed  Type of NONPRIORITY	uncocuro	d claim:		
	At least one of the debtors and another	Student loans	unsecure	u Ciaiii.		
	☐ Check if this claim is for a community debt	☐ Obligations arising or	ut of a sepa	aration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims	rofit charir	ng plans, and other similar de	shte	
	□ No					
	■ Yes		perior C	tion action pending i ourt No. 4 under Cau 2-CC-001274.		
4.2	Woodbury Financial Services, Inc. Nonpriority Creditor's Name	Last 4 digits of accoun	t number	8948		Unknown
	c/o Corporation Service Company 135 N. Pennsylvania St., Suite 1610 Indianapolis, IN 46204	When was the debt inc	urred?	2017		
-	Number Street City State Zlp Code	As of the date you file,	the claim	is: Check all that apply		
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY	unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising or	it of a sena	aration agreement or divorce	that you did not	
	Is the claim subject to offset?	report as priority claims	at of a sope	aration agreement of arvorce	that you did not	
	■ No	Debts to pension or p	rofit-sharir	ng plans, and other similar de	ebts	
	Yes		ential li ims	ability in connection	with FINRA	
Part 3:	List Others to Be Notified About a De	ebt That You Already Liste	d			
is tryir have r	is page only if you have others to be notified ng to collect from you for a debt you owe to s nore than one creditor for any of the debts th d for any debts in Parts 1 or 2, do not fill out	omeone else, list the original at you listed in Parts 1 or 2, lis	creditor in	Parts 1 or 2, then list the	collection agency	here. Similarly, if you
Adam	nd Address <b>G. Wentland, Esq.</b>	On which entry in Part 1 or Part Line 4.21 of (Check one):		list the original creditor?  Part 1: Creditors with Priori	ty Unsecured Clair	ms
535 Ar	DORA ORINGHER PC nton Boulevard, Ninth Floor Mesa, CA 92626-7109			Part 2: Creditors with Nonp	riority Unsecured (	Claims
<b>000.</b> u		Last 4 digits of account number	r	0857		
Adam	nd Address G. Wentland, Esq. DORA ORINGHER PC	On which entry in Part 1 or Pal Line <u>4.24</u> of ( <i>Check one</i> ):	Ĺ	list the original creditor? Part 1: Creditors with Priori Part 2: Creditors with Nonp	•	
	nton Boulevard, Ninth Floor			. 3.1 2. Groundro with Horip	Jiloodalda (	
Costa	Mesa, CA 92626-7109	Last 4 digits of account number	er	0857		
	nd Address	On which entry in Part 1 or Pa	•	•		
	G. Wentland, Esq. DORA ORINGHER PC	Line 4.4 of (Check one):	_	Part 1: Creditors with Priori	-	
INEU	DONA UNINGHER FC			Part 2: Creditors with Nonp	riority Unsecured	Claims

Case 18-00774-RLM-7 Doc 14 Filed 02/28/18 EOD 02/28/18 10:00:48 Pg 26 of 35

Debtor 1 Robert Hayes Hoffman		Case number (if know)	18-00774-RLM			
535 Anton Boulevard, Ninth Floor Costa Mesa, CA 92626-7109	Last 4 digits of account number	0057				
	Last 4 digits of account number	0857				
Name and Address Bank of America PO Box 982234	On which entry in Part 1 or Part 2 did Line <b>4.1</b> of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Prior  Part 2: Creditors with Nonp				
El Paso, TX 79998-2234	Last 4 digits of account number	5378				
Name and Address BMW Card Services PO Box 9210 Old Bethpage, NY 11804	On which entry in Part 1 or Part 2 did Line 4.3 of (Check one):	☐ Part 1: Creditors with Prior ☐ Part 2: Creditors with Nonp				
	Last 4 digits of account number	0364				
Name and Address David M. Henn, Esq. Henn Haworth Cummings + Page 1634 Smith Valley Road, Suite B Greenwood, IN 46142	On which entry in Part 1 or Part 2 did Line <b>4.26</b> of ( <i>Check one</i> ):	you list the original creditor?  Part 1: Creditors with Prior  Part 2: Creditors with Nonp				
5.55.W 554, W 45142	Last 4 digits of account number	er <b>1274</b>				
Name and Address David Thomas Page, Esq. Henn Haworth Cummings + Page 1634 Smith Valley Road, Suite B	On which entry in Part 1 or Part 2 did Line 4.26 of (Check one):	you list the original creditor?  Part 1: Creditors with Prior  Part 2: Creditors with Nonp	-			
Greenwood, IN 46142	Last 4 digits of account number	1274				
Name and Address Johnson County Sheriff 1091 Hospital Road PO Box 609 Franklin, IN 46131	On which entry in Part 1 or Part 2 did Line 4.26 of (Check one):	you list the original creditor?  Part 1: Creditors with Prior  Part 2: Creditors with Nonp	-			
,	Last 4 digits of account number	1274				
Name and Address Progressive Insurance 6300 Wilson Mills Rd.	On which entry in Part 1 or Part 2 did Line 4.8 of (Check one):	you list the original creditor?  Part 1: Creditors with Prior  Part 2: Creditors with Nonp				
Cleveland, OH 44143	Last 4 digits of account number	3931	onority Unsecured Claims			
Name and Address U.S. Department of Education 400 Maryland Avenue, SW Washington, DC 20202	On which entry in Part 1 or Part 2 did Line 4.12 of (Check one):	☐ Part 1: Creditors with Prior ☐ Part 2: Creditors with Nonp	•			
	Last 4 digits of account number	0001				
Name and Address U.S. Department of Education 400 Maryland Avenue, SW Washington, DC 20202	On which entry in Part 1 or Part 2 did Line 4.13 of (Check one):	☐ Part 1: Creditors with Prior ☐ Part 2: Creditors with Nonp				
	Last 4 digits of account number	0002				
Name and Address U.S. Department of Education 400 Maryland Avenue, SW Washington, DC 20202	On which entry in Part 1 or Part 2 did Line 4.14 of (Check one):  Last 4 digits of account number	you list the original creditor?  Part 1: Creditors with Prior  Part 2: Creditors with Nonp  0003				
Part 4: Add the Amounts for Each Type of U  6. Total the amounts of certain types of unsecured cla		al reporting purposes only 29	3 U.S.C. 8159. Add the amounts for each			
type of unsecured claim.	amo. This information is for statistic					
6a. Domestic support obligation	ns	Total	2,000.00			

ebtor 1 Rok	btor 1 Robert Hayes Hoffman		Case number (if know)		18-00774-RLM	
Total claims						
om Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	13,000.00	
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00	
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00	
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	15,000.00	
				Tota	I Claim	
	6f.	Student loans	6f.	\$	4,258.00	
Total claims						
om Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00	
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00	
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	3,855,412.84	
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	3,859,670.84	

Fill in this infor	mation to identify your	case:		
Debtor 1	Robert Hayes Ho	ffman		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF INDIANA	
Case number	18-00774-RLM			
(if known)				☐ Check if this
				amended fil

## Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	BMW Financial Services Attn: Bankruptcy Department Po Box 3608 Dublin, OH 43016	Lease for vehicle. Debtor is lessee.
2.2	Skyhouse Channelside Apartments 112 N. 12th Street Tampa, FL 33602	Residential lease for apartment. Co-Signer on lease for sons. Lease ends May 2018.

#### Case 18-00774-RLM-7 Doc 14 Filed 02/28/18 EOD 02/28/18 10:00:48 Pg 29 of 35

Fill in th	is information to identify your	case:			
Debtor 1					
Debioi	Robert Hayes Hot	Middle Name	Last Name		
Debtor 2 (Spouse if, t	iling) First Name	Middle Name	Last Name		
	-				
United S	tates Bankruptcy Court for the:	SOUTHERN DISTRICT C	)F INDIANA		
Case nur	mber 18-00774-RLM				
(if known)				Check if this is an	
				amended filing	
Officia	al Form 106H				
Sche	dule H: Your Cod	ebtors		12/15	;
people are fill it out, your nam  1. Do No Your Service No Arizo No Your 3. In Co in lir	re filing together, both are equation and number the entries in the lie and case number (if known) by you have any codebtors? (If you have any codebtors? (If you have any codebtors, have you have any codebtors, have you have any codebtors, have you have any codebtors. Did your spouse, former spoullumn 1, list all of your codebtors 2 again as a codebtor only if	ally responsible for supply boxes on the left. Attach to a community property and a community property was a lived in a community property was a lived in a community property as a community property was a community property or a community property was a community propert	ying correct information. If mothe Additional Page to this page to this page to this page to this page to not list either spouse as a code perty state or territory? (Comparto Rico, Texas, Washington, are with you at the time?	nmunity property states and territories include	wn
out	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		tumn 2: The creditor to whom you owe the delect all schedules that apply:	ot
	., , ,		Cile	ook ali sorioddios triat appry.	
3.1	Justin Lankford		Пс	Schedule D, line	
0.1	PO Box 886			Schedule E/F, line 4.1	
	Greenwood, IN 46142-088	6		Schedule G	
			Ban	nk Of America	
3.2	Rebecca Kay Hoffman 1030 Peppermill Run Greenwood, IN 46143		□ s □ s	Schedule D, line2.5 Schedule E/F, line Schedule Gst Merchants Bank, N.A.	
3.3	Rebecca Kay Hoffman 1030 Peppermill Run Greenwood, IN 46143		□ s □ s	Schedule D, line 2.1 Schedule E/F, line Schedule G O Harris	

Debtor 1	Robert Hayes Hoffman	Case number (if known) 18-00774-RLM
	Additional Page to List More Codebtors	
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.4	Rebecca Kay Hoffman 1030 Peppermill Run Greenwood, IN 46143	■ Schedule D, line □ Schedule E/F, line □ Schedule G Citimortgage
3.5	Woodbury Financial Services Inc. c/o Corporation Service Company 135 North Pennsylvania St., Ste. 1610 Indianapolis, IN 46204	☐ Schedule D, line ■ Schedule E/F, line4.21 ☐ Schedule G Kris and Sandy Dielman
3.6	Woodbury Financial Services Inc. c/o Corporation Service Company 135 North Pennsylvania St., Ste. 1610 Indianapolis, IN 46204	☐ Schedule D, line ■ Schedule E/F, line4.24 ☐ Schedule G Louis Vasquez
3.7	Woodbury Financial Services Inc. c/o Corporation Service Company 135 North Pennsylvania St., Ste. 1610 Indianapolis, IN 46204	☐ Schedule D, line ■ Schedule E/F, line ☐ Schedule G Candice Dielman

Fill	in this information to id	lentifv vour ca	se:								
		obert Hayes									
	otor 2 use, if filing)					_					
Uni	ted States Bankruptcy	Court for the:	SOUTHERN DISTRIC	T OF INDIANA		_					
	se number 18-00	774-RLM					Check if this i  An amend  A supplen	led fil	U	a nootnotition	oboptor
										ollowing date:	
	fficial Form 1						MM / DD/	YYY	Y		
	chedule I: Yo		<b>)MC</b> ible. If two married peop	nlo aro filing togeth	or (Dobte	xr 1	and Dobtor 2) b	oth a	ro ogu	ally respons	12/15
sup <sub>l</sub>	plying correct inform use. If you are separa ch a separate sheet to	ation. If you a sted and your o this form. C	are married and not filing spouse is not filing with the top of any addition	g jointly, and your th you, do not inclu	spouse i	s liv natio	ing with you, inc on about your sp	lude ouse	inform a. If mo	nation about ore space is	your needed,
1.	Fill in your employn information.	nent		Debtor 1			Debtor	2 or	non-fil	ling spouse	
	If you have more that attach a separate page	, ,	Employment status	☐ Employed			□ Emp	•			
	information about ad employers.	0	Occupation	■ Not employed			☐ Not	emple	oyed		
	Include part-time, sea self-employed work.	asonal, or	Occupation Employer's name	Financial Advis	ser						
	Occupation may inclu or homemaker, if it a		Employer's address								
			How long employed th	nere?							
Par	t 2: Give Details	s About Mon	thly Income								
	mate monthly income use unless you are sep		te you file this form. If y	rou have nothing to r	eport for a	any l	ine, write \$0 in th	e spa	ce. Inc	clude your no	n-filing
	u or your non-filing spo e space, attach a sepa		re than one employer, co	mbine the information	on for all e	mplo	oyers for that pers	on o	n the lir	nes below. If	you need
							For Debtor 1			otor 2 or ng spouse	
2.			y, and commissions (be alculate what the monthly		2.	\$	0.00	\$		N/A	-
3.	Estimate and list me	onthly overti	me pay.		3.	+\$	0.00	<b>+</b>	\$	N/A	-
4.	Calculate gross Inc	ome. Add line	e 2 + line 3.		4.	\$	0.00		\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Debt	or 1	Robert Hayes Hoffman	_	Case number (if	known)	18-00774	-RLM	
				For Debtor	1	For Debt	or 2 or g spouse	
	Сор	y line 4 here	4.	\$	0.00	\$	N/A	
5.	List	all payroll deductions:						
٠.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A	
	5e.	Insurance	5e.	\$	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	\$	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	\$		+ \$	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	 6.	\$	0.00	\$	N/A	
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$	N/A	
8.		all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$	0.00	\$	N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify:	_ 8h.+	\$	0.00	+ \$	N/A	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	N/A	
10.	Calc	culate monthly income. Add line 7 + line 9.	10. \$	0.00	) + \$	N/	<b>A</b> = \$	0.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.						
11.	1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  11. +\$ 0.00							
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies					2. \$	0.00
							Combined	
13.	Do y ■	you expect an increase or decrease within the year after you file this form No.  Yes. Explain:	?				monthly in	ncome

Official Form 106I Schedule I: Your Income page 2

	in this information	diameter interesting				İ				
FIII	in this informa	ition to identify yo	ur case:							
Deb	otor 1	Robert Hayes	s Hoffma	an				if this is:		
D-1							-	n amended filing	da a a caracta a CC a caraba	
	otor 2 ouse, if filing)								ving postpetition cha the following date:	apter
(	,							'		
Unit	ted States Bank	ruptcy Court for the:	SOUTH	IERN DISTRICT OF INI	DIANA		Ν	MM / DD / YYYY		
Cas	se number 18	3-00774-RLM								
(If k	nown)									
0	fficial Fo	rm 106J								
S	chedule	J: Your I	 Exper	ises						12/15
Be info	as complete ormation. If m	and accurate as	possible. eded, atta	. If two married people ich another sheet to th						t
		ribe Your House	hold							
1.	Is this a join									
	No. Go to									
		es Debtor 2 live i	n a separ	ate nousenoid?						
					fou Comounts House	15 - 1 - 1 - 1 D	- 1- 4 -	0		
	ШY	es. Debtor 2 mus	it file Offici	al Form 106J-2, Expens	ses for Separate House	enola of D	ebto	or∠.		
2.	Do you hav	e dependents?	☐ No							
	Do not list D Debtor 2.	ebtor 1 and	Yes.	Fill out this information fo each dependent				Dependent's age	Does dependent live with you?	
	Do not state	the							□ No	
	dependents				Son			19 Years	■ Yes	
									■ No	
					Son			25 Years	☐ Yes	
									□ No	
									☐ Yes	
									□ No	
3.	De veur ev		_						☐ Yes	
э.	expenses of	penses include If people other th d your depender	han ┌	No Yes						
Dor	+ O. Fottim	ata Vaur Ongair	na Manth	ly Eynanaa						
Est	imate your ex		our bankrı	uptcy filing date unles y is filed. If this is a su						
				government assistanc						
	ficial Form 10		a nave inc	cluded it on <i>Schedule</i> i	i: Your income	- 1	_	Your expe	enses	
4.		or home ownersl		uses for your residence	e. Include first mortgage	e 4.	\$		0.00	
		ded in line 4:	<b>3</b>							
	4o Dari	notate towar				4 -	Φ.		0.00	
		estate taxes erty, homeowner's	or renter	's insurance		4a. 4b.			0.00	
		•		upkeep expenses			\$		0.00	
		owner's associati				4d.			0.00	
5.				our residence, such as	home equity loans		\$		0.00	

Debto	Robert Hayes Hoffman	Case num	ber (if known)	18-00774-RLM
6. I	Jtilities:			
-	6a. Electricity, heat, natural gas	6a.	\$	341.00
	Sb. Water, sewer, garbage collection	6b.	·	149.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	·	300.00
	6d. Other. Specify:	6d.	·	0.00
	Food and housekeeping supplies	— oa. 7.	·	300.00
	Childcare and children's education costs	7. 8.	\$	0.00
		9.	\$	
	Clothing, laundry, and dry cleaning	9. 10.		110.00
	Personal care products and services		· —	150.00
	Medical and dental expenses	11.	\$	0.00
	<b>Fransportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.	12.	\$	100.00
	Do not include car payments.  Entertainment, clubs, recreation, newspapers, magazines, and books	13.	· <u> </u>	
			·	0.00
	Charitable contributions and religious donations	14.	Ф	0.00
	nsurance.			
	Oo not include insurance deducted from your pay or included in lines 4 or 20.	150	¢	0.00
	15a. Life insurance	15a.	·	0.00
	15b. Health insurance	15b.	·	0.00
	15c. Vehicle insurance	15c.	·	0.00
	15d. Other insurance. Specify:	15d.	\$	0.00
	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify:	16.	\$	0.00
	nstallment or lease payments:		_	
	17a. Car payments for Vehicle 1	17a.	·	743.00
	17b. Car payments for Vehicle 2	17b.	\$	0.00
•	17c. Other. Specify:	17c.	\$	0.00
•	17d. Other. Specify:	17d.	\$	0.00
	Your payments of alimony, maintenance, and support that you did not report as		_	2.22
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
9. (	Other payments you make to support others who do not live with you.		\$	3,300.00
	Specify: Payment of apartment for sons in college/grad school	19.		
0. (	Other real property expenses not included in lines 4 or 5 of this form or on Sche	dule I: Yo	our Income.	
2	20a. Mortgages on other property	20a.	\$	0.00
2	20b. Real estate taxes	20b.	\$	0.00
2	20c. Property, homeowner's, or renter's insurance	20c.	\$	0.00
2	20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeowner's association or condominium dues	20e.	\$	0.00
	Other: Specify:		+\$	0.00
'	Striet. Opedity.		.Ψ	0.00
2. (	Calculate your monthly expenses			
2	22a. Add lines 4 through 21.		\$	5,493.00
2	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	5,493.00
•				3,433.00
3. (	Calculate your monthly net income.		·	
2	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	0.00
2	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	5,493.00
	••••			
2	23c. Subtract your monthly expenses from your monthly income.			
-	The result is your <i>monthly net income</i> .	23c.	\$	-5,493.00
	, ,			
	Do you expect an increase or decrease in your expenses within the year after yo			
F	For example, do you expect to finish paying for your car loan within the year or do you expect your			ease or decrease because of a
	modification to the terms of your mortgage?			
	No			
1	Tyes Explain here:			

Fill in this	information to identify your	case:			
Debtor 1	Robert Hayes Ho	ffman			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name		
(Opodoc II, IIII	ng) Thousand				
United Sta	tes Bankruptcy Court for the:	SOUTHERN DISTRICT	OF INDIANA		
Case numl	ber 18-00774-RLM				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106Doc				
	Form 106Dec				
Decla	ration About a	an Individual	Debtor's So	chedules	12/15
If two marr	ied people are filing togethe	r, both are equally respor	isible for supplying co	rrect information.	
You must f	ile this form whenever you fi	ile bankruptcy schedules	or amended schedules	s. Making a false state	ement, concealing property, or
obtaining r	money or property by fraud in	n connection with a bank			00, or imprisonment for up to 20
years, or b	oth. 18 U.S.C. §§ 152, 1341, 1	I519, and 3571.			
	Sign Below				
Did v	ou pay or agree to pay some	eone who is NOT an attorn	nev to help you fill out	hankruptev forms?	
J.u ,	ou pay or agree to pay come		ioy to noip you iii out	Januario, Tormo	
<b>=</b> 1	No				
	Yes. Name of person			Attach Ban	kruptcy Petition Preparer's Notice,
	·			Declaration	, and Signature (Official Form 119)
Under	penalty of perjury, I declare	that I have read the sumr	nary and schedules file	ed with this declaration	on and
	ney are true and correct.		,		
Y /o	/ Dobort House Hoffman		X		
	d/ Robert Hayes Hoffman obert Hayes Hoffman		Signature of	f Debtor 2	
	ignature of Debtor 1		Oignatale of	. 200.01 2	
Da	ate <b>February 28, 2018</b>		Date		